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CONFIRMATION NO. 8590

|  |   |                                |   |  |
|--|---|--------------------------------|---|--|
| <b>SERIAL NUMBER</b><br>10/539,734   | <b>FILING OR 371(c) DATE</b><br>12/21/2005<br><b>RULE</b>   | <b>CLASS</b><br>607            | <b>GROUP ART UNIT</b><br>3762   | <b>ATTORNEY DOCKET NO.</b><br>003413.00033 |
| <b>APPLICANTS</b><br>Mark L Witten, Tucson, AZ;  |   |                                |   |  |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/US03/40259 12/18/2003<br>which claims benefit of 60/433,996 12/18/2002<br><br><b>** FOREIGN APPLICATIONS *****</b><br><br><div style="text-align: center;">** SMALL ENTITY **</div>  |   |                                |   |  |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged _____<br>Examiner's Signature _____ Initials _____ |   | <b>STATE OR COUNTRY</b><br>AZ  | <b>SHEETS DRAWING</b><br>5  | <b>TOTAL CLAIMS</b><br>15                  |
|  |   | <b>INDEPENDENT CLAIMS</b><br>1 |   |  |
| <b>ADDRESS</b><br>22907  |   |                                |   |  |
| <b>TITLE</b><br>Stimulation of hair regrowth   |   |                                |   |  |
| <b>FILING FEE RECEIVED</b><br>365  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |